

ALABAMA

RECOMMENDED MEDICAL PROTOCOL FOR NEWBORNS WITH COED HEARING LOSS

A. Primary Care Provider

1. Activities
 - a. Initiates and supervises evaluation and referral process
 - b. Referral sources include ENT, Otology, Genetics, Audiologists and Therapists.
2. Notification sent to Parents, Primary Care Provider and The Alabama Newborn Hearing Resource Coordinator
3. Important Historical Factors
 - a. Prenatal History
 - 1) Exposure Ototoxic Medication
 - 2) Significant complications during pregnancy
 - 3) Immunization to Rubella
 - 4) Syphilis screening
 - 5) Maternal Drug Use
 - 6) History spontaneous abortions
 - b. Perinatal High-Risk Factors
 - 1) Family History of Childhood SNHL
 - 2) Craniofacial Abnormalities .
 - 3) Birthweight <1500 grams (3.3 lbs)
 - 4) Hyperbilirubinemia to degree that Exchange Blood Transfusion heeded
 - 5) In-Utero Infection such as TORCH
 - 6) Ototoxic Medications,,including, but not limited to Aminoglycosides Used in Multiple Courses or in Combination with Loop Diuretics.
 - 7) APGAR Score of 0-4 at 1 minute or 0-6 at 5 minutes
 - c. Family History
 - 1) Family with history of SNHL especially if Onset in younger age groups <30 years
 - 2) Family desires to have additional children
4. Physical Factors
 - a. Minor abnormalities
 - 1) Unusual body features with no cosmetic or functional significance,
 - b. Major Abnormalities
 - 1) Those associated cosmetic or functional abnormalities e.g. cleft lip/palate, skeletal or limb deformities, Ophthalmologic deformities, cardiac abn. Etc.
 - 2) Poor growth, microcephaly, abnormal neurological function
5. Laboratory
 - a. Urine culture for CMV (prior to 3 weeks of age)
 - b. Other test as indicated e.g Bun